


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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. NEURO 101 US	
		First Inventor Jean Rapin, et al.	
		Express Mail Label No. EV330777131US	
Title <i>Tripeptide and Tripeptide Derivatives for the Treatment of Neuro-degenerative Diseases</i>			
Application Elements <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner of Patents Mail Stop Patent Application PO BOX 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>		8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small>		9. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>	
3. <input checked="" type="checkbox"/> Specification [Total Pages 49] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages 1] 5.		ACCOMPANYING APPLICATION PARTS	
6. Oath or Declaration [Total Pages 8] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Unexecuted c. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>		10. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 11. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(when there is an assignee)</small> <input type="checkbox"/> Power of Attorney 12. <input type="checkbox"/> English Translation Document (if applicable) 13. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 14. <input checked="" type="checkbox"/> Preliminary Amendment 15. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 16. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 17. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 18. <input checked="" type="checkbox"/> Other: check for \$ 750.00	
7. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
19. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: PCT Application No. PCT/EP02/01180			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
20. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<div style="border: 1px solid black; padding: 2px; text-align: center;">20786</div> <small>(Insert Customer No. or Attach bar code label here)</small>	
		OR <input checked="" type="checkbox"/> Correspondence address below	
Firm or Individual Name	Sherry M. Knowles, Esq. (Registration No. 33,052)		
Address	King & Spalding 191 Peachtree Street		
City	Atlanta	State	GA
		ZIP	30303-1763
Country	U.S.A.	Telephone	404-572-3541
		Fax	404-572-5145
Name (Print Type): Sherry M. Knowles		Registration No. (Attorney/Agent) 33,052	
Signature <i>Sherry M. Knowles</i>		Date	August 5, 2003

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16310 H.S. In Fc

DEE TRANSMITTAL

This sheet accompanies a patent application transmittal for the following application:

Inventor(s): Jean Rapin, et al.

Filing Date: August 5, 2003

Title: *Tripeptide and Tripeptide Derivatives for the Treatment of Neuro-degenerative Diseases*

The filing fee is calculated as shown below:

1. FILING FEE:

SMALL ENTITY			LARGE ENTITY	
FOR:	FEE	FEE PAID	FEE	FEE PAID
<input checked="" type="checkbox"/> UTILITY FILING FEE	\$370.00		\$750.00	\$750.00
<input type="checkbox"/> DESIGN FILING FEE	\$165.00		\$330.00	
<input type="checkbox"/> PLANT FILING FEE	\$255.00		\$510.00	
<input type="checkbox"/> REISSUE FILING FEE	\$370.00		\$740.00	
<input type="checkbox"/> PROVISIONAL FILING FEE	\$80.00		\$160.00	
SUBTOTAL (1)				\$750.00

2. CLAIMS:

		SMALL ENTITY			LARGE ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE	RATE	FEE
TOTAL CLAIMS	16-20 =		x \$9 =	\$	x \$18 =	0
INDEP. CLAIMS	2- 3 =		x \$42 =	\$	x \$84 =	0
<input checked="" type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+\$140 =		\$	+\$280 =
SUBTOTAL (2)				\$		\$ 280.00

3. ADDITIONAL FEES:

		SMALL ENTITY		LARGE ENTITY	
FOR:		FEE	FEE PAID	FEE	FEE PAID
<input type="checkbox"/>	LATE FILING, FEE OR OATH	\$65		\$130	
<input type="checkbox"/>	NON-ENGLISH SPECIFICATION	\$130		\$130	
<input type="checkbox"/>	OTHER				
SUBTOTAL (3)			\$		

TOTAL FILING FEES: \$ 1300.00

A check is enclosed for the amount: \$ 750.00

☒ Charge any additional fees required under 37 C.F.R. 1.16 or 1.17 to Deposit Account 11-0980.

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45th Floor, 191 Peachtree Street, N.E.

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Telephone: 404.572.4600

By: Shawn Knowles / HORNE VU Date: August 5, 2003

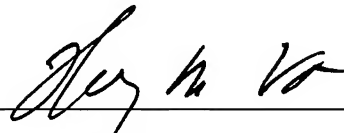
Sherry M. Knowles, Esq.

Reg. No. 33,052

UTILITY PATENT APPLICATION FILING

Certificate of Mailing Under 37 CFR 1.10

I hereby certify that this Utility Patent Application and Transmittal, along with any documents referred to as attached therein are being deposited with the United States Postal Service in an envelope as "Express Mail Post Office to Addresses" services under 37 CFR 1.10, Mailing Label Number EV330777131US addressed to mail Stop Patent Application, Commissioner for Patents, PO Box 1450, Alexandria VA 22313-1450.



Hoang M. Vo

Date: August 5, 2003
NEURO 101